

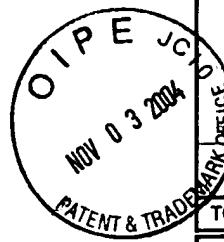
11-05-04

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	490.00
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Complete if Known

Application Number	09/954731
Filing Date	September 18, 2001
First Named Inventor	Jeffrey J. Fitzgerald
Examiner Name	PUENTE, Emerson C.
Art Unit	2113
Attorney Docket No.	CDPC-P01-004

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

 Deposit Account:

Deposit Account Number **18-1945**
Under Order No.: CDPC-P01-004

Deposit Account Name **Ropes & Gray LLP**

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)		0.00	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Extra Claims	Fee from Claims below	Fee Paid	
Total Claims 20	-22** = [] x [] = 0.00		
Independent Claims 3	-3** = [] x [] = 0.00		
Multiple Dependent	[] = 0.00		
Large Entity Small Entity			
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)		0.00	
*Reduced by Basic Filing Fee Paid			
		SUBTOTAL (3) (\$)	490.00

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		(Complete if applicable)		
Name (Print/Type)	Wolfgang E. Stutius	Registration No. (Attorney/Agent)	40,256	Telephone (617) 951-7681
Signature		Date	November 3, 2004	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 543606710 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: **November 3 2004**

Signature: (Judith A. Herrick)

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AMENDMENT TRANSMITTAL LETTER

Docket No.
CDPC-P01-004

Application No.
09/954731

Filing Date
September 18, 2001

Examiner
PUENTE, Emerson C.

Art Unit
2113

Applicant(s): Jeffrey J. Fitzgerald

Invention: METHOD AND SYSTEM TO DETECT SOFTWARE FAULTS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	20	- 22 =		x	0.00
Independent Claims	3	- 3 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					490.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					490.00

Large Entity

Small Entity

No additional fee is required for this amendment.

Please charge Deposit Account No. 18-1945 in the amount of \$ 490.00.
A duplicate copy of this sheet is enclosed.

A check in the amount of \$ _____ to cover the filing fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

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Credit any overpayment.

Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


Wolfgang E. Stutius
Attorney Reg. No.: 40,256

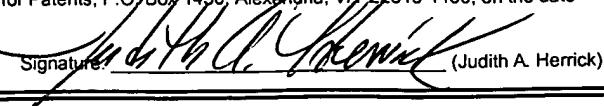
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/954731
		Filing Date	September 18, 2001
		First Named Inventor	Jeffrey J. Fitzgerald
		Art Unit	2113
		Examiner Name	PUENTE, Emerson C.
Total Number of Pages in This Submission	11	Attorney Docket Number	CDPC-P01-004

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Amendment Transmittal Letter
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	ROPS & GRAY LLP Wolfgang E. Stutius - 40,256
Signature	
Date	November 3, 2004

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Dated: November 3 2004

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